

Taylorsville Municipal Elections Campaign Finance Statement

Report of Contributions and Expenditures

Name of 0	Candidate		
Street Add	dress City	State Zip Code	
Office See	eking District Number	Area Code & Phone Number Area Code & F	Fax Numl
		ype of Report neck the appropriate box)	
	REPORT – Eliminated at Primary	REPORT – Not Eliminated at Primary	,
	Thirty days after Primary Election (Required by all candidates eliminated in the pri	Seven days before a General Election (Required by all candidates not eliminated Primary)	d in
)	Yes Is this report an amendm No	Thirty days after the General Election (Required by all candidates not eliminated Primary)	ł in
	Re	port Verification	
	affirm that this Rep	ort of Contributions and Expenditures discorrect to the best of my knowledge.	
	Signature of Can	didate Date	
	To File this Form Mail or deliver to:	For Office Use Only	
	Taylorsville City Recorder 2600 West Taylorsville Blvd. Taylorsville, UT 84118	□ Date Received □ Time Received □ Received by	_
	For More Information Contact the Recorder's Office (801) 963-5400 Fax (801) 963-7891		

Summary Page

(Complete this page after filling out other schedules

		Before General Election		
CONT	CONTRIBUTIONS RECEIVED			
	TOTAL CONTRIBUTIONS RECEIVED \$50.00 AND ABOVE (See Schedule A)			
	TOTAL CONTRIBUTIONS RECEIVED BELOW \$50.00 (See Schedule A)			
	TOTAL CONTRIBUTIONS RECEIVED (See Schedule A)			

EXPE	NDITURES MADE	
	TOTAL EXPENDITURES MADE (See Schedule B)	

Summary Page

(Complete this page after filling out other schedules

		After General Election		
CONT	CONTRIBUTIONS RECEIVED			
	TOTAL CONTRIBUTIONS RECEIVED \$50.00 AND ABOVE (See Schedule A)			
	TOTAL CONTRIBUTIONS RECEIVED BELOW \$50.00 (See Schedule A)			
	TOTAL CONTRIBUTIONS RECEIVED (See Schedule A)			

EXPENDITURES MADE			
	TOTAL EXPENDITURES MADE (See Schedule B)		

Summary Page

(Complete this page after filling out other schedules

		After Primary Election		
CONT	CONTRIBUTIONS RECEIVED			
	TOTAL CONTRIBUTIONS RECEIVED \$50.00 AND ABOVE (See Schedule A)			
	TOTAL CONTRIBUTIONS RECEIVED BELOW \$50.00 (See Schedule A)			
	TOTAL CONTRIBUTIONS RECEIVED (See Schedule A)			

EXPENDITURES MADE			
	TOTAL EXPENDITURES MADE (See Schedule B)		

Schedule A

Itemized Contributions Received

Attach additional pages if needed

Allacii addilidila	pages ii needed		
Date Received	Name of Donor	Complete Mailing Address	Amount of Contribution \$50.00 +
SUBTOTAL			
TOTAL CONTRIBUTIONS RECEIVED (Sum of subtotals from all Schedule A pages)			

Schedule B

Itemized Expenditures Made

Attach additional pages if needed

Date of Expenditure	Name of Recipient	Purpose	Amount of Expenditure
SUBTOTAL FOR THIS PAGE			
TOTAL EXPENDITUTRES MADE (Sum of subtotals from all Schedule B pages)			